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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | • | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Nina | |
| Write the name that is on your government-issued | First name | First name |
| picture identification (for | Middle name | Middle name |
| example, your driver's license or passport | Belt Last name | Last name |
| Daine a constant and | Last Harrie | Last Harrie |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last | First name | First name |
| 8 years | Michael and a super | Michelle ve succession |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 6993 | xxx - xx |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification number (ITIN) | 9 xx - xx- | 9 xx - xx- |

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| About Debtor 1: About Debtor 2 (Spouse Only in a Joint Ca | ise): |
|---|-----------|
| 4. Any business names and Employer I have not used any business names or EINs. | |
| Identification Numbers (EIN) you have used in the last | |
| 8 years Business name Business name | |
| Include trade names and doing business as names EIN EIN | |
| EIN | |
| 5. Where you live 12604 S Justine If Debtor 2 lives at a different address: | |
| Number Street Number Street | |
| Calumet ParkIllinois60827CityStateZip CodeCityStateZip Code | |
| Cook | |
| County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. County If Debtor 2's mailing address is different from fill it in here. Note that the court will send any notices to you at this mailing address. | |
| Number Street Number Street | |
| City State Zip Code City State Zip Code | lo. |
| 6. Why you are | |
| choosing this district | Lhavo |
| to file for bankruptcy Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | |
| I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. | §§ 1408.) |
| | |
| | |
| | |
| | |

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| Debtor 1 Nina | | Belt | | Case number (if kno | own) |
|---|---|--|--|--|---|
| First Name | Middle Name | Last Name | | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy Cas | se | | | |
| The chapter of the Bankruptcy Code you are choosing to file under | | escription of each, see <i>Notic</i>). Also, go to the top of page | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. How you will pay the fee | more details about he cashier's check, or m may pay with a credit I need to pay the fee Individuals to Pay You I request that my fee judge may, but is not the official poverty lire. | ow you may pay. Typicall noney order If your attor t card or check with a pre e in installments. If you cour Filing Fee in Installments t required to, waive your far that applies to your far on, you must fill out the | y, if your ney is printed the content of the conten | ou are paying the submitting you ad address. This option, significial Form 103 this option only d may do so onlize and you are used. | the clerk's office in your local court for e fee yourself, you may pay with cash, in payment on your behalf, your attorney an and attach the <i>Application for SA</i>). If you are filing for Chapter 7. By law, a lay if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. Have you filed for bankruptcy within the last 8 years? | No. Yes. District District District | | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | | When When | MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. Do you rent your residence? | ✓ No. Go to lir | ne 12. | | - | o you want to stay in your residence? St You (Form 101A) and file it with |

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Belt Debtor 1 Nina __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Mind
 Belt
 Case number (if known)

 Last Name

| Pa | rt 5: Explain Your Effor | rts to Receive a Brie | fing About Credit Counseling | | | |
|-----|---|---|--|-----------------------|--|---|
| | | About Debtor 1: | | About | Debtor 2 (Sp | oouse Only in a Joint Case): |
| 15. | Tell the court | You must check one: | | You m | ust check one: | |
| | whether you have received briefing about credit counseling. | counseling agen | ing from an approved credit icy within the 180 days before I ptcy petition, and I received a npletion. | co | unseling ager | ing from an approved credit ncy within the 180 days before I optcy petition, and I received a npletion. |
| | The law requires that you receive a briefing | | he certificate and the payment plan, veloped with the agency. | | | he certificate and the payment plan, veloped with the agency. |
| | about credit counseling before you file for bankruptcy. You must truthfully | counseling agen | ing from an approved credit acy within the 180 days before I ptcy petition, but I do not have a appletion. | co | unseling ager | ing from an approved credit ncy within the 180 days before I ptcy petition, but I do not have a mpletion. |
| | check one of the following choices. If you cannot do so, you are not eligible to file. | | er you file this bankruptcy petition, opy of the certificate and payment | you | | er you file this bankruptcy petition, opy of the certificate and payment |
| | If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your | from an approve obtain those ser made my reques | ked for credit counseling services and agency, but was unable to vices during the 7 days after I and exigent circumstances emporary waiver of the | fro ob ma me | m an approve tain those se ade my reques | ked for credit counseling services ed agency, but was unable to vices during the 7 days after I st, and exigent circumstances emporary waiver of the |
| | creditors can begin collection activities again. | requirement, attac efforts you made t unable to obtain it | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were before you filed for bankruptcy, and imstances required you to file this | rec effo una | quirement, attao orts you made able to obtain it at exigent circu | ay temporary waiver of the ch a separate sheet explaining what to obtain the briefing, why you were t before you filed for bankruptcy, and umstances required you to file this |
| | | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. | wit | | e dismissed if the court is dissatisfied for not receiving a briefing before ruptcy. |
| | | receive a briefing must file a certifica with a copy of the | fied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. | rec mu wit | ceive a briefing st file a certifica h a copy of the | sfied with your reasons, you must still within 30 days after you file. You ate from the approved agency, along payment plan you developed, if any. o, your case may be dismissed. |
| | | • | he 30-day deadline is granted only mited to a maximum of 15 days. | | , | he 30-day deadline is granted only mited to a maximum of 15 days. |
| | | I am not required counseling beca | d to receive a briefing about credit use of: | | m not require unseling beca | d to receive a briefing about credit ause of: |
| | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. | | Incapacity. | I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances. |
| | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. | | Disability. | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so. |
| | | Active duty. | I am currently on active military duty in a military combat zone. | | Active duty. | I am currently on active military duty in a military combat zone. |
| | | about credit coun | are not required to receive a briefing seling, you must file a motion for punseling with the court. | ab | out credit cour | are not required to receive a briefing seling, you must file a motion for ounseling with the court. |

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded ✓ No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Nina Belt Signature of Debtor 1 Signature of Debtor 2 8/23/2017 Executed on Executed on _ MM / DD / YYYY MM / DD / YYYY

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| Debtor 1 Nina | | Belt | Case number (if | fknown) |
|--|----------------------------|--------------------------|--------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed und | ler Chapter 7, 11, 12, c | or 13 of title 11, Unite | nave informed the debtor(s) about d States Code, and have explained the also certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | ired by 11 U.S.C. § 34 | 2(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge after | an inquiry that the info | ormation in the sched | dules filed with the petition is incorrect. |
| attorney, you do not | 4.5 | | | |
| need to file this page. | /s/ Kashwal Kaur | | Date _ | 8/23/2017 |
| | Signature of Attorney for | or Debtor | | IM / DD / YYYY |
| | | | | |
| | | | | |
| | Kashwal Kaur | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Ave | nue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | | Email address | kkaur@semradlaw.com |
| | | | | |
| | D | | Illinois | 8 |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your c | ase: | | |
|------------------------|---------------------------|-------------|----------------------|--|
| Debtor 1 | Nina | | Belt | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | |
| | | | (State) | |
| Case number (If known) | | | | |

| П | Check if | this | is | an |
|---|----------|---------|----|----|
| | amende | d filir | ١g | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | · |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$2,975.00 ——————————————————————————————————— |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$2,975.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | , , , , , , |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$22,249.90 |
| Your total liabilities | \$22,249.90 |
| Part 3: Summarize Your Income and Expenses | |
| and Cummunian I out into the una Experience | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,674.40 |
| Sopy your combined monthly income norm line 12 or conedule f | |
| | |

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Belt Debtor 1 Nina __ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,645.76 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | inforr | nation to identify your ca | ase: | | | | | |
|---|---|--|--|-----------------------|---|-------------------------|---|---|
| Debtor 1 | | Nina | | | Belt | | | |
| Debtor I | | First Name | Middle N | lame | Last Name | | | |
| Debtor 2 (Spouse, if fi | ling) | First Name | Middle N | lame | Last Name | | | |
| | • | ankruptcy Court for the: | Northern | iaiiie | District of Illinois | | | |
| | | ankruptcy Court for tire. | Norunem | | (State) | | | |
| Case num (If known) | nber | - | | | | | | |
| Officia | 1 5 | orm 106A/B | | | | | | Check if this is an |
| | | | | | | | | amended filing |
| Sche | dul | e A/B: Prope | rty | | | | | 12/1 |
| category v responsible write your | where le for name | you think it fits best. B supplying correct inform a and case number (if k | Be as complete a mation. If more s nown). Answer e | nd ac pace very | • | eople are to this fo | e filing together, both a orm. On the top of any a | re equally |
| Part 1: | Desc | ribe Each Residenc | e, Building, Lai | nd, o | r Other Real Estate You Own or | Have a | an Interest In | |
| | | or have any legal or eq So to Part 2 | uitable interest i | n an | y residence, building, land, or similai | r propert | y? | |
| | | | | | | | | |
| ш | 165. | Where is the property? | | Wh | at is the property? Check all that apply | , | Do not doduct socured | claims or exemptions. Put |
| 1.1 | | | | | Single-family home | y - | the amount of any secu | red claims on Schedule D: |
| | Stree | t address, if available, or o | other description | П | Duplex or multi-unit building | | | ims Secured by Property. |
| | | | | | Condominium or cooperative | | Current value of the entire property? | Current value of the portion you own? |
| | | | | | Manufactured or mobile home Land | | | |
| | Num | ber Street | | H | Investment property | | Describe the nature of | |
| | | | | H | Timeshare | | interest (such as fee s the entireties, or a life | |
| | City | State | Zip Code | | Other | | | |
| | | | | Wh | o has an interest in the property? Ch | neck | Check if this is co (see instructions) | mmunity property |
| | | | | one | | | | |
| | | | | H | Debtor 1 only Debtor 2 only | | | |
| | | | | H | Debtor 1 and Debtor 2 only | | | |
| | | | | Ħ | At least one of the debtors and another | • | | |
| | | | | | er information you wish to add abou | t this ite | m, such as local | |
| If you | own (| or have more than one, lis | st here | pro | perty identification number: | | | |
| , 5 u | • | or mare more unan ene, ne | 31.13.3. | Wh | at is the property? Check all that apply | y. | | claims or exemptions. Put |
| 1.2 | Stree | t address, if available, or o | other description | | Single-family home | | | red claims on Schedule D: nims Secured by Property. |
| | | | | | Duplex or multi-unit building | | Current value of the | Current value of the |
| | | | | H | Condominium or cooperative Manufactured or mobile home | | entire property? | portion you own? |
| | | | | H | Land | | | |
| | Num | ber Street | | Ħ | Investment property | | Describe the nature of interest (such as fee s | |
| | City | State | Zip Code | | Timeshare Other | | the entireties, or a life | |
| | | | , | Ш | | | Check if this is co | mmunity property |
| | | | | Wh one | o has an interest in the property? Ch | reck | (see instructions) | |
| | | | | | Debtor 1 only | | ш | |
| | | | | | Debtor 2 only | | | |
| | | | | | Debtor 1 and Debtor 2 only | | | |
| | | | | | At least one of the debtors and another | r | | |
| | | | | | er information you wish to add abou perty identification number: | t this ite | m, such as local | |

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| Debtor 1 | Nina | | Belt | Case numbe | r (if known) | |
|--------------------------------|--|---|---|--------------------|--|---|
| | First Name | Middle Name | Last Name | | . , | |
| 1.3Stre | et address, if available, or otl | | Ahat is the property? Check all th Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | at apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| Nun City | nber Street State | Zip Code | Land Investment property Timeshare Other | | Describe the nature or interest (such as fee s the entireties, or a life | imple, tenancy by |
| | | [] [] [] 0 | The has an interest in the proper Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a other information you wish to adroperty identification number: | another | (see instructions) | mmunity property |
| 2. Add | the dollar value of the por | • | II of your entries from Part 1, in | cluding any entrie | s for pages | |
| | ve attached for Part 1. Wr | - | • | | | |
| | | | > | | | |
| Do you ow you own tl | hat someone else drives. If y ns, trucks, tractors, sport uti | equitable interest ou lease a vehicle, a | in any vehicles, whether they and also report it on Schedule G: Executycles | - | - | |
| ✓ Yes | S | | | | | |
| 3.1 | Make Model: Year: | Saturn Vue 2005 | Who has an interest in the prone. Debtor 1 only | roperty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims <i>Secured by Property.</i> |
| | Approximate mileage: Other information: 2005 Saturn Vue | 200000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors | | Current value of the entire property? \$1125.00 | Current value of the portion you own? \$1125.00 |
| | | | Check if this is communi instructions) | ty property (see | | |
| 3.2 | Make Model: Year: | | Who has an interest in the prone. Debtor 1 only | operty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors | | Current value of the entire property? | Current value of the portion you own? |
| | | | Check if this is communi instructions) | ty property (see | | |

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| ame el: coximate mileage: crinformation: el: crinformation: crinformation: crinformation: crinformation: crinformation: | | Who has an interest in the propertione. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community proinstructions) Who has an interest in the propertione. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and a Check if this is community proinstructions. | nother perty (see ty? Check | the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu | claims or exemptions. Pured claims on Schedule aims Secured by Property Current value of the portion you own? claims or exemptions. Pured claims on Schedule aims Secured by Property Current value of the portion you own? |
|---|-----------------------------|--|---|--|--|
| el: coximate mileage: er information: e el: coximate mileage: coximate mileage: cr information: | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community proinstructions) Who has an interest in the propertone. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and a Check if this is community pro | nother perty (see ty? Check | the amount of any secu Creditors Who Have Clat Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Clat Current value of the | red claims on Schedule aims Secured by Property Current value of the portion you own? claims or exemptions. Property ared claims on Schedule aims Secured by Property Current value of the |
| el: oximate mileage: r information: ft, aircraft, motor homes, | | Who has an interest in the propertione. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community pro | nother | the amount of any secu Creditors Who Have Cla Current value of the | rred claims on Schedule nims Secured by Property Current value of the |
| r information: ft, aircraft, motor homes, | | Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community pro | | | |
| | | Check if this is community pro | | | |
| | | , | | | |
| e | | | ty? Check | Do not deduct secured the amount of any secu | |
| oximate mileage: | <u></u> | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a | nother | Current value of the entire property? | Current value of the portion you own? |
| | | Check if this is community pro instructions) | operty (see | | |
| el: | | | ty? Check | the amount of any secu | claims or exemptions. Pured claims on Schedule aims Secured by Property |
| oximate mileage: | | Debtor 2 only Debtor 1 and Debtor 2 only | | Current value of the entire property? | Current value of the portion you own? |
| r information: | | At least one of the debtors and a | | | |
| el o: r | ximate mileage:information: | information: | one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community proinstructions) Who has an interest in the proper one. Debtor 1 only | Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only | the amount of any secu Creditors Who Have Clar Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only The amount of any secu Current value of the entire property? Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Do not deduct secured the amount of any secu Creditors Who Have Clar Debtor 1 only |

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| De | btor 1 | | | | Belt | Case number (if known) | |
|----------|--------------------------|--------------------------------|---|---------------------|--|-------------------------------------|--|
| | | First Name | | ddle Name | Last Name | | |
| | | | our Personal and e any legal or equ | | ems t in any of the follow | ring items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | | _ | and furnishings | | | | |
| ' | Exampl No | les: Major app | liances, furniture, liner | ns, china, kitchen | ware | | |
| <u>✓</u> | | escribe | 3 Beds, 3 Dressers, 2 | ! Nightstands | | | \$650.00 |
| | | ronics les: Television | s and radios; audio, vi | ideo, stereo, and | digital equipment; comp | outers, printers, scanners; music | 1 |
| V | | escribe | 2 Televisions, 3 Cellp | hones | | | \$550.00 |
| | | | and figurines; painting | • | r artwork; books, pictures ollections, memorabilia, o | = | |
| | Yes. D | escribe | | | | | |
| ı | Examp | les: Sports, ph | orts and hobbies notographic, exercise, as; carpentry tools; mu | - | | ol tables, golf clubs, skis; canoes | |
| | No Yes. D | Describe | | | | | 1 |
| ш | | | | | | | |
| | 0. Fire Examp | | les, shotguns, ammur | nition, and related | equipment | | |
| ✓ | No | | | | | | 1 |
| Ш | Yes. L | escribe | | | | | |
| | 1. Clot Exampl | | clothes, furs, leather o | oats, designer we | ear, shoes, accessories | | 1 |
| ✓ | No | | | | | | |
| | Yes. D | escribe | | | | | |
| | 2. Jew Exampl | - | | lry, engagement r | ings, wedding rings, hei | rloom jewelry, watches, gems, | |
| 片 | | Describe | Misc. Costume Jewel | lrv | | | #50.00 |
| ك | | | 25. 25.3 | , | | | \$50.00 |
| | | -farm animal les: Dogs, cat | s, birds, horses | | | | |
| ✓ | No | | | | | | 1 |
| | Yes. D | escribe | | | | | |
| 1 | 4. Any | other persor | nal and household ite | ems you did not | already list, including | any health aids you did not list | 1 |
| ✓ | No | | | | | | |
| | Yes. D | escribe | | | | | |
| | | | - | | | for pages you have attached | \$1500.00 |

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$20.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: TCF \$130.00 17.1. Checking account: \$200.00 17.2. Checking account: First Midwest 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Nina | | Belt | Case number (if known) | |
|------|--|--|----------------------------|---|--|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers ents are those you cannot transfe | checks, promissory no | tes, and money orders. | |
| 0.4 | Bulling | | | | |
| 21. | Retirement or pension Examples: Interests in IF | |), thrift savings accounts | s, or other pension or profit-sharing plans | |
| | √ No | | | | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account separately. | 401(k) or similar plan: | | | |
| | зерагатегу. | Pension plan: | | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments I deposits you have made so that with landlords, prepaid rent, public Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | | | | |
| | | - | | | |
| | | | | | |

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| Debt | tor 1 Nina First Name Midd | Belt le Name Last Name | Case number (if known) | |
|------|---|--|--|--|
| 24. | | ccount in a qualified ABLE program, or under | a qualified state tuition program. | |
| | No | cription. Separately file the records of any interests | .11 U.S.C. § 521(c): | |
| | | | | |
| 25. | Trusts, equitable or future interests i exercisable for your benefit | n property (other than anything listed in line 1 |), and rights or powers | |
| | No Yes. Describe | | | |
| 26. | Examples: Internet domain names, webs | le secrets, and other intellectual property sites, proceeds from royalties and licensing agreen | nents | |
| | Yes. Describe | | | |
| 27. | Licenses, franchises, and other gene Examples: Building permits, exclusive lic | ral intangibles enses, cooperative association holdings, liquor lic | enses, professional licenses | |
| | Yes. Describe | | | |
| Mor | ney or property owed to you? | | | Current value of the |
| | | | | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds owed to you | | | portion you own? Do not deduct secured |
| | Tax refunds owed to you | | | portion you own? Do not deduct secured |
| | <u> </u> | Anticipated Tax Refund | Federal: | portion you own? Do not deduct secured |
| | No ✓ Yes. Give specific information | Anticipated Tax Refund | Federal: State: | portion you own? Do not deduct secured claims or exemptions. |
| 28. | No Yes. Give specific information about them, including whether you already filed the returns and the tax years | Anticipated Tax Refund | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | No Yes. Give specific information about them, including whether you already filed the returns and the tax years | Anticipated Tax Refund | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony | | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony | | State: Local: ivorce settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony | | State: Local: ivorce settlement, property settlement Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 |
| 28. | No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony | | State: Local: ivorce settlement, property settlemen Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 |
| 28. | No Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony | | State: Local: ivorce settlement, property settlemen Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 |
| 28. | Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insura | | State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Yes. Give specific information about them, including whether you already filed the returns and the tax years Family support Examples: Past due or lump sum alimony No Yes. Give specific information Other amounts someone owes you Examples: Unpaid wages, disability insura | n, spousal support, child support, maintenance, d | State: Local: ivorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |

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| Deb | tor 1 Nina | | Belt | Case number (if known) | |
|----------|---|-------------------------|---------------------------------|--|--|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance policies Examples: Health, disability, or life | | ings account (HSA); credit, ho | omeowner's, or renter's insurance | |
| | No ✓ Yes. Name the insurance cor | Comp | pany name: | Beneficiary: | Surrender or refund value: |
| | of each policy and list its value | | rica Life Insurance, TERM | | \$0.00 |
| | | | | | _ |
| | | | | | _ |
| 32. | Any interest in property that is If you are the beneficiary of a livin property because someone has o | g trust, expect proceed | | , or are currently entitled to receive | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 33. | Claims against third parties, w Examples: Accidents, employmen | | | a demand for payment | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 34. | Other contingent and unliquid to set off claims | ated claims of every | nature, including counterc | laims of the debtor and rights | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 35. | Any financial assets you did no | ot already list | | | |
| | ✓ No Yes. Describe | | | | |
| | | | | | |
| 0.0 | Add the deller value of all of or | Dont | 4 in alcoding and antication | | |
| 36. | Add the dollar value of all of yo for Part 4. Write that number h | | | | \$350.00 |
| | | | | | |
| Port | Describe Any Rusiness | -Related Property | You Own or Have an In | terest In. List any real estate in Pa | rt 1 |
| Part 37. | | | | | 11.1. |
| | No. Go to Part 6. | - | | | Current value of the |
| | Yes. Go to line 38. | | | | portion you own? Do not deduct secured claims |
| 38. | Accounts receivable or commi | ssions you already ea | arned | | or exemptions |
| | ✓ No | - | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 39. | Office equipment, furnishings, Examples: Business-related comp | | ems, printers, copiers, fax mad | chines, rugs, telephones, desks, chairs, ele | ctronic devices |
| | . No | | | · | |
| | Yes. Describe | | | | |
| | | | | | |

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| Debt | tor 1 Nina | Belt | Case number (if known) | |
|-------|--|---|---------------------------------|--|
| 40. | First Name Middle Nam Machinery, fixtures, equipment, supplies yo | | ır trade | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| 41. | Inventory | | | |
| | No No | | | |
| | Yes. Describe | | | |
| | | | | |
| 42. | Interests in partnerships or joint ventures | | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | _ |
| | them | | | _ |
| | | | | |
| 43. (| Customer lists, mailing lists, or other compil | ations | | |
| | ✓ No | | | |
| | Yes. Do your lists include personally identif | fiable information (as defined in 11 U. | S.C. § 101(41A))? | |
| | ☐ No | | | |
| | Yes. Describe | | | |
| 11 | Any business-related property you did not a | Nroody list | | |
| 44. | - No | ineauy nst | | |
| | ✓ No Yes. Give specific | | | |
| | information | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| 45. A | dd the dollar value of all of your entries from | Part 5, including any entries for p | pages you have attached | |
| | art 5. Write that number here | | | |
| Part | 6: Describe Any Farm- and Commerc | cial Fishing-Related Property | You Own or Have an Interest In. | |
| | If you own or have an interest in farmland, list | it in Part 1. | | |
| 46. | Do you own or have any legal or equitable i | interest in any farm- or commercia | al fishing-related property? | |
| | No. Go to Part 7. | | | Current value of the portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims or exemptions |
| 47. | Farm animals | | | or oxomptions |
| | Examples: Livestock, poultry, farm-raised fish | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | I |

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| Debto | | Nina First Name | | Belt Last Name | Case number (if known) | | |
|----------------|----------|--------------------------------------|---|---------------------------------------|------------------------|--------------|-------------|
| 48. | | ps-either growing o | | | | | |
| | ✓ | No Yes. Describe | | | | | |
| 49. | Far | m and fishing equip No Yes. Describe | ment, implements, machinery, fixtu | res, and tools of trade | | | |
| 50. | Far | m and fishing suppl | ies, chemicals, and feed | | | | |
| | ✓ | No | , | | | | |
| | Ė | Yes. Describe | | | | | |
| 51. | Any | | cial fishing-related property you did | not already list | | | |
| | | Yes. Describe | | | | | |
| | | | l of your entries from Part 6, includir here | | ou have attached | | |
| Part 7 | | Describe All Pro | perty You Own or Have an Inter | est in That You Did No | nt l ist Ahove | | |
| | | | perty of any kind you did not already | | e Liot / too / to | | |
| | _ | | s, country club membership | | | | |
| | | No Yes. Give specific | | | | | |
| | Ш | information | | | | | |
| 54. Ad | ld th | ne dollar value of al | l of your entries from Part 7. Write th | nat number here | |) | |
| | | | | | | | |
| | | | | | | | |
| Part 8 | 3: | List the Totals of | Each Part of this Form | | | | |
| 55. P | art | 1: Total real estate | , line 2 | | | | |
| 56. p | art : | 2 total vehicles, line | e 5 | \$1125.00 | | | |
| 57. P a | art 3 | 3: Total personal an | d household items, line 15 | \$1500.00 | | | |
| 58. P a | art 4 | l: Total financial as | sets, line 36 | \$350.00 | | | |
| 59. P | art | 5: Total business-re | elated property, line 45 | · · · · · · · · · · · · · · · · · · · | | | |
| 60. P | art | 6: Total farm- and f | ishing-related property, line 52 | | | | |
| 61. P | art | 7: Total other prope | erty not listed, line 54 | | | | |
| 62. T | otal | personal property. | Add lines 56 through 61 | \$2975.00 | Copy personal prope | erty total 🕨 | + \$2975.00 |
| 63 Ta | ntal | of all property on S | chedule A/B. Add line 55 + line 62 | | | | \$2975.00 |
| 33.10 | | a proporty on o | | | | | |

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| Debtor 1 | Nina | | Belt | Case number (if known) | |
|----------|-------------|-------------|------------|------------------------|--|
| | First Names | Middle Name | Look Mosso | | |

Schedule A/B: Property. Additional page

| Part 3: Describe | Part 3: Describe Your Personal and Household Items | | | | | | |
|--------------------|---|----------|--|--|--|--|--|
| Do you own or ha | Current value of the portion you own? Do not deduct secured claims or exemptions. | | | | | | |
| 6.2. Household goo | ds and furnishings | | | | | | |
| No | | | | | | | |
| Yes. Describe | 2 Couches | \$100.00 | | | | | |
| 6.3. Household goo | ds and furnishings | | | | | | |
| No | | | | | | | |
| Yes. Describe | Coffee Table, 2 End Tables | \$50.00 | | | | | |
| 6.4. Household goo | 6.4. Household goods and furnishings | | | | | | |
| No | | | | | | | |
| Yes. Describe | Table | \$100.00 | | | | | |

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| Fill in this information to identify your case: | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|
| Debtor 1 | Nina | | Belt | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | |
| Case number (If known) | | | ,, | | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | tt 1: Identify the Property You Clair | m as Exempt | | |
|----|---|---|---|------------------------------------|
| 1. | Which set of exemptions are you claim | ing? Check one only, ev | ven if your spouse is filing with you. | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(| 2) | |
| 2. | For any property you list on Schedule A | /B that you claim as e | xempt, fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| | Brief description: Primerica Life Insurance, TERM Line from Schedule A/B: 31 | \$0.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(f) |
| | Brief description: | \$650.00 | V | 735 ILCS 5/12-1001(b) |
| | 3 Beds, 3 Dressers, 2 Nightstands Line from Schedule A/B: 06 | | \$650.00 100% of fair market value, up to any applicable statutory limit | _ |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) vithin 1,215 days before you filed this case? | |

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 Debtor 1 First Name
 Middle Name
 Belt Last Name
 Case number (if known)

 Last Name
 Last Name

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
|---|---|---|--|
| Brief description: 2 Couches Line from Schedule A/B: 06 | \$100.00 | \$100.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Coffee Table, 2 End Tables Line from Schedule A/B: 06 | \$50.00 | \$50.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Table Line from Schedule A/B: 06 | \$100.00 | \$100.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: 2 Televisions, 3 Cellphones Line from Schedule A/B: 07 | \$550.00 | \$550.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Misc. Costume Jewelry Line from Schedule A/B: 12 | \$50.00 | \$50.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Cash On Hand Line from Schedule A/B: 16 | \$20.00 | \$20.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Checking account, TCF Line from Schedule A/B: 17 | \$130.00 | \$130.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Checking account, First Midwest Line from Schedule A/B: 17 | \$200.00 | \$200.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Federal, Anticipated Tax Refund Line from Schedule A/B: 28 | \$0.00 | \$0 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| Brief description: Saturn Vue, 2005, 2005 Saturn Vue Line from Schedule A/B: 03 | \$1,125.00 | \$1,125.00; \$0.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b) |

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| | | | reament rage =e | | | |
|--------------|----------------------------------|---------------------------------|---|----------------------|------------------------|------------------------------------|
| Fill in this | information to identify your | case: | | | | |
| Debtor 1 | Nina | | Belt | | | |
| | First Name | Middle Name | Last Name | - | | |
| Debtor 2 | | | | _ | | |
| (Spouse, if | iling) First Name | Middle Name | Last Name | | | |
| United St | ates Bankruptcy Court for the: | Northern | District of Illinois | | | |
| _ | | | (State) | - | | |
| Case nur | nber | | | - | | |
| Offic | ial Form 106D | | | | | Check if this is an amended filing |
| Sche | edule D: Credi | tors Who Ha | ve Claims Secu | ired by Pr | operty | 12/15 |
| more spa | | | e are filing together, both are nber the entries, and attach it | | | |
| 1. Do | any creditors have claims | secured by your proper | ty? | | | |
| ~ | No. Check this box and sub | omit this form to the court | with your other schedules. You | have nothing else to | o report on this form. | |
| | Yes. Fill in all of the informat | ion below. | | | | |
| Part 1: | List All Secured Claims | | | | | |
| for e | | reditor has a particular claim, | red claim, list the creditor separat list the other creditors in Part 2 g to the creditor's name. | | the collateral | Column C Unsecured portion If any |

this claim

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| Fill in | n this infori | mation to identify your c | ase: | | | |
|---|---|---|--|--|---|--|
| Debt | or 1 | Nina | | Belt | | |
| | | First Name | Middle Name | Last Name | | |
| Debt | | = | | | | |
| (Spou | ise, if filing) | First Name | Middle Name | Last Name | | |
| Unite | ed States B | ankruptcy Court for the: | Northern | District of Illinois | | |
| Casa | number | | | (State) | | |
| (If kno | | _ | | | | |
| Offi | icial F | orm 106E/F | | | | Check if this is an amended filing |
| | | | | | | _ |
| Sc | hedu | ıle E/F: Cre | editors Who | Have Unsec | cured Claims | 12/1 |
| other Form claim the e know | party to a 106A/B) a s that are ntries in the n). | any executory contracts and on Schedule G: Exe Ilisted in Schedule D: C he boxes on the left. At | s or unexpired leases tha cutory Contracts and Un Creditors Who Hold Claim tach the Continuation Pa | t could result in a claim. A expired Leases (Official F is Secured by Property. If i | Also list executory contracts orm 106G). Do not include an nore space is needed, copy t | n NONPRIORITY claims. List the on Schedule A/B: Property (Official y creditors with partially secured he Part you need, fill it out, number rite your name and case number (if |
| Part | LIST | All of Your PRIORIT | Y Unsecured Claims | | | |
| 1. | | | secured claims against | you? | | |
| | No. C | Go to Part 2. | | | | |
| | Yes. | | | | | |
| | listed, ider As much a | ntify what type of claim it as possible, list the claims | is. If a claim has both prior in alphabetical order acco | ity and nonpriority amounts | , list that claim here and show b If you have more than two pric | arately for each claim. For each claim oth priority and nonpriority amounts. ority unsecured claims, fill out the |

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

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| Debto | or 1 Nina | Belt | Case number (if known) | |
|--------|---|------------------|--|-------------------|
| | First Name Middle Name | Last Name | | |
| Part 2 | List All of Your NONPRIORITY Unsecured | Claims | | |
| [| Do any creditors have nonpriority unsecured claims a No. You have nothing to report in this part. Submi Ves. | • | e court with your other schedules. | |
| 4. L | List all of your nonpriority unsecured claims in the algunaters claim, list the creditor separately for each claim. | For each claim I | er of the creditor who holds each claim. If a creditor has more isted, identify what type of claim it is. Do not list claims already in Part 3.If you have more than four priority unsecured claims fill our | cluded in Part 1. |
| | | | | Total claim |
| 4.1 | AFFILIATED CREDIT SERV | | Last 4 digits of account number 9284 | \$69.00 |
| | Nonpriority Creditor's Name 7381 Airport View Dr SW | | When was the debt incurred? 12/2015 | |
| | Number Street | | As of the date you file, the claim is: Check all that apply. | |
| | | | Contingent | |
| | Rochester Minnesota 55902 | | Unliquidated | |
| | City State Zip Co Who incurred the debt? Check one. | de | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only | | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | 001 Collection; Collecting for ORIGINAL CREDITOR: MEDICAL | |
| | ✓ No | | Other. Specify PAYMENT DATA | |
| | Yes | | | |
| 4.2 | CONVERGENT OUTSOURCING | | Last 4 digits of account number 1354 | \$464.00 |
| | Nonpriority Creditor's Name 10750 HAMMERLY BLVD #200 | | When was the debt incurred? 12/2014 | |
| | Number Street | | As of the date you file the claim in Check all that apply | |
| | | | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Houston Texas 77043 | | Unliquidated | |
| | City State Zip Co | de | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | | | |
| | Debtor 2 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | | Student loans | |
| | At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | 분 | | Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt ls the claim subject to offset? | • | debts 001 Collection; Collecting for | |
| | No | | ORIGINAL CREDITOR: | |
| | Yes | | Other. Specify COMCAST | |
| 4.3 | CREDITORS DISCOUNT & A | | | \$1,552.00 |
| 4.3 | Nonpriority Creditor's Name | | Last 4 digits of account number 4255 | \$1,552.00 |
| | 415 E MAIN ST Number Street | | When was the debt incurred? 8/2015 | |
| | Trained Cases | | As of the date you file, the claim is: Check all that apply. | |
| | STREATOR Illinois 61364 | | Contingent | |
| | City State Zip Co | | Unliquidated | |
| | Who incurred the debt? Check one. | | Disputed | |
| | Debtor 1 only | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | | Student loans | |
| | Debtor 1 and Debtor 2 only At least one of the debtors and another | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | : | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offset? | | 001 Collection; Collecting for | |
| | No No | | ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | |
| | Yes | | TAMBLET DATA | |

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 LC SYSTEM INC \$91.00 6001 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 9/2014 PO BOX 64378 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL Minnesota 55164 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: ATT **✓** No Other. Specify WIRELINE Yes Kennedy Crossing Apartments \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3400 Stevens Ct Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 46323 Indiana Hammond City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ eviction, past due rent Is the claim subject to offset? **✓** No Yes MBB 4.6 \$143.00 2833 Last 4 digits of account number Nonpriority Creditor's Name 1550 N NORTWEST HWY STE 403 When was the debt incurred? 10/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent PARK RIDGE 60068 Illinois Unliquidated City State Zip Code Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another

✓ No

Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

V

Other. Specify

Debts to pension or profit-sharing plans, and other similar

001 Collection; Collecting for

ORIGINAL CREDITOR: MEDICAL

PAYMENT DATA

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Nicor - PO Box 5407 \$800.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 5407 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ GAS BILL Is the claim subject to offset? **✓** No T Yes PRESTIGE FINANCIAL SVC \$13,418.00 4.8 8113 Last 4 digits of account number ____ Nonpriority Creditor's Name When was the debt incurred? 7/2013 351 W OPPORTUNITY WAY Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated DRAPER Utah 84020 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 060 Automobile, 2016-M1-Other. Specify _ Is the claim subject to offset? **✓** No Yes Pronger Smith Medical Care \$1,551.90 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 789 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60477 Tinley Park Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts

✓ No ✓ Yes

Check if this claim relates to a community debt

Is the claim subject to offset?

Other. Specify 2016-M6-004745, medical bill

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 TORRES CREDIT SRV \$1,861.00 Last 4 digits of account number 1181 Nonpriority Creditor's Name 27 FAIRVIEW ST STE 301 When was the debt incurred? 6/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent CARLISLE 17015 Pennsylvania Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: **✓** No Other. Specify COMMONWEALTH EDISON CO Yes 4.11 US Bank \$300.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 130 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated HILLSBORO 45133 Ohio City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ **OVERDRAFT FEES** Is the claim subject to offset? **✓** No

Yes

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Michael Torchalski PC On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 820 E Terra Cotta Ave Ste 207 Line 4.8 Part 1: Creditors with Priority Unsecured Claims Street one): Number Part 2: Creditors with Nonpriority Unsecured 60014 Crystal Lake Illinois Last 4 digits of account number 8113 City State Zip Code John, Edwards On which entry in Part 1 or Part 2 did you list the original creditor? PO BOX 1501 Line 4.9 of (Check Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Highland Indiana 46322 Last 4 digits of account number

City

State

Zip Code

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Part 4: Add the Amounts for Each Type of Unsecured Claim Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 Total claims 6a. Domestic support obligations. from Part 1 \$0.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$0.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00

\$22,249.90

\$22,249.90

6h. Debts to pension or profit-sharing plans, and other similar

6i. Other. Add all other nonpriority unsecured claims. Write

that amount here.

6j. Total. Add lines 6f through 6i.

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| Fill in this infor | mation to identify your c | ase: | | | |
|---------------------|---------------------------|-------------|---------------|---------|--|
| Debtor 1 | Nina | | Belt | | |
| | First Name | Middle Name | Last I | Name | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last I | Name | |
| United States E | Bankruptcy Court for the: | Northern | District of I | llinois | |
| | | | | (State) | |
| Case number | | | | | |
| (If known) | | | | | |

| Official Form 10 | 06G | ì |
|------------------|-----|---|
|------------------|-----|---|

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| | | | • | J | |
|---|---|----------------------------|--|---|--|
| Fill in this infor | mation to identify your c | ase: | | | |
| Debtor 1 | Nina | | Belt | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | = | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | | |
| | | | | | Check if this is ar |
| | | | | | amended filing |
| Official | Form 106H | | | | |
| Cabadul | a H. Vaur Caa | labtava | | | |
| Schedul | e H: Your Cod | leptors | | | 12/15 |
| No Yes 2. Within the Idaho, Lou No. Yes. | e last 8 years, have you uisiana, Nevada, New Mex Go to line 3. Did your spouse, forme No | r spouse, or legal equiva | operty state or territor lashington, and Wiscon | r y? (<i>Commui</i> sin.) e time? | nity property states and territories include Arizona, California, the name and current address of that person. |
| | - | | | | |
| | Name of your spouse, f | ormer spouse, or legal equ | iivalent | | |
| | Number Street | | | | |
| | City | State | Zip (| Code | |
| | - | | • | | |
| | • | | • | | buse is filing with you. List the person shown in line 2 and the creditor on Schedule D (Official Form 106D), |

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

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| | | | | 9 | | | |
|---|----------------------------------|--|---------------------------------------|----------------|----------------------|---|--|
| Fill in this informa | ation to identify | your case: | | | | | |
| Debtor 1 Nina | a | | Belt | | | | |
| First | t Name | Middle Name | Last N | ame | Che | eck if this is: | |
| Debtor 2 | I NI | NAC-L-III - NI | 1 1 . N . | | _ | An amended filing | |
| (Spouse, if filing) First | i Name | Middle Name | Last N | ame | | • | |
| United States Bank | ruptcy Court for | Northern | District of Illi | | | A supplement showing post-petition chap expenses as of the following date: | |
| the: Case number | | | (S | tate) | | | |
| (If known) | | | | | · | MM / DD / YYYY | |
| Official For | m 106l | | | | | | |
| Schedule I | | come | | | | | |
| information about spouse. If more sp number (if known | your spouse. I pace is needed | f you are separated and attach a separate shew a question. | d your spous | e is not filir | ng with you, do | r spouse is living with you, include not include information about your ional pages, write your name and ca | |
| 1 Fill in your own | Novmont | | Debtor 1 | | | Debtor 2 | |
| Fill in your emption. | noyment | | | | | | |
| If you have more | e than one iob | Employment status | ✓ Emplo | yed | | Employed | |
| attach a separate | e page with | | Not Employed | | | Not Employed | |
| information abou employers. | ut additional | Occupation Dealer | | | | _ | |
| Include part time | n sossonal or | • | | | | - | |
| self-employed w | | Employer's name | Horseshoe | Hammond | | - | |
| | | | mployer's address One Harra Number St | | | Number Street | |
| | | | | | | _ | |
| | | | Las Vegas | Nevada | 89119 | | |
| | | | City | State | Zip Code | City State Zip Code | |
| | | How long employed there? | | | | | |
| Part 2: Give Do | etails About M | Ionthly Income | | | | | |
| Estimate monthl | y income as of t | he date you file this form | 1. If you have | nothing to re | oort for any line, v | write \$0 in the space. Include your non-filir | |
| spouse unless you | are separated. | | | | - | | |
| | | | combine the | ntormation to | or all employers to | or that person on the lines below. If you ne | |
| more space, attac | h a separate she | et to this form. | | _ | . D. la . | For Debtor 2 or | |
| more space, attac | h a separate shee | et to this form. | | Fo | r Debtor 1 | For Debtor 2 or non-filing spouse | |
| 2. List monthly | gross wages, sala | ry, and commissions (before calculate what the monthly was | | 2. Fo | \$3,650.44 | | |
| List monthly deductions.) If be. | gross wages, sala | ry, and commissions (befor calculate what the monthly v | | | | | |

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| Debtor 1Nina First Name Middle Nam | Belt e Last Nam | Δ | Case number | (if | |
|--|------------------------------------|----------|----------------------------|-----------------------------------|--------------------------|
| THE NAME NAME | c Last Name | <u> </u> | known) For Debtor 1 | For Debtor 2 or non-filing spouse | |
| Copy line 4 here | → | 4. | \$3,650.44 | | • |
| 5. List all payroll deductions: | | | | | |
| 5a. Tax, Medicare, and Social Security deducti | ons | 5a. | \$652.80 | | |
| 5b. Mandatory contributions for retirement pla | ns | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retirement plan | s | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement fund loa | ans | 5d. | \$0.00 | | |
| 5e. Insurance | | 5e. | \$323.25 | | |
| 5f. Domestic support obligations | | 5f. | \$0.00 | | |
| 5g. Union dues | | 5g. | \$0.00 | | |
| 5h. Other deductions. Specify: | | 5h. + | + \$0.00 + | | |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5b + 5b$. | 5c + 5d + 5e +5f + 5g | 6. | \$976.04 | | |
| 7. Calculate total monthly take-home pay. Subtract | et line 6 from line 4. | 7. | \$2,674.40 | | |
| 8. List all other income regularly received: | | | | | |
| 8a. Net income from rental property and from obusiness, profession, or farm | | | | | |
| Attach a statement for each property and busin gross receipts, ordinary and necessary busines | | | | | |
| the total monthly net income. | | 8a. | \$0.00 | | |
| 8b. Interest and dividends | | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a non-fil dependent regularly receive | | | | | |
| Include alimony, spousal support, child suppo divorce settlement, and property settlement. | rt, maintenance, | 8c. | \$0.00 | | |
| 8d. Unemployment compensation | | 8d. | \$0.00 | | |
| 8e. Social Security | | 8e. | \$0.00 | | |
| 8f. Other government assistance that you regu Include cash assistance and the value (if knowr cash assistance that you receive, such as food under the Supplemental Nutrition Assistance Pro housing subsidies Specify: | n) of any non- stamps (benefits | 8f. | \$0.00 | | |
| 8g. Pension or retirement income | | 8g. | \$0.00 | | |
| 8h. Other monthly income. Specify: | | 8h. + | | | |
| 9. Add all other income Add lines 8a + 8b + 8c + 8d | I + 8e + 8f +8g + 8h. | 9. | \$0.00 | |] |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 | 2 or non-filing spouse | 10. | \$2,674.40 + | | \$2,674.40 |
| 11. State all other regular contributions to the explict line of the contributions from an unmarried partner, in friends or relatives. Do not include any amounts already included in line | nembers of your househo | old, you | ur dependents, your roomma | | |
| Specify: | | | . , , | | 11. + \$0.00 |
| 12. Add the amount in the last column of line 10 t Write that amount on the Summary of Schedules a | | | | | 12. \$2,674.40 Combined |
| 13. Do you expect an increase or decrease within No. | the year after you file t | this for | m? | | monthly income |
| Yes. Explain: | | | | | |

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| | | Docu | illelit Page 35 01 00 |) | | |
|---------------------------------|--|--|---|---------------------------------|-----------------|---------------------|
| Fill in this infor | mation to identify y | our case: | | | | |
| Debtor 1 | Nina | | Belt | | | |
| | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filin | ıg | |
| | Bankruptcy Court for | | District of Illinois | A supplement shexpenses as of t | | petition chapter 13 |
| Case number | | | (State) | expenses as or t | The following (| Jace. |
| (If known) | | | | MM / DD / YYYY | , | |
| Official | Form 106 | S <mark>J</mark> | | | | |
| Schedul | e J: Your E | xpenses | | | | 12/15 |
| information. If | more space is nee | possible. If two married people and ded, attach another sheet to this | | | | |
| | wer every question | | | | | |
| Part 1: Des | cribe Your Hous | ehold | | | | |
| 1. Is this a joi | nt case? | | | | | |
| ✓ No. Go | to line 2 | | | | | |
| Yes. D | oes Debtor 2 live in | n a separate household? | | | | |
| | No | | | | | |
| [| Yes. Debtor 2 mi | ust file Official Forms 106J-2, Expen | ses for Separate Household of Deb | for 2. | | |
| 2. Do you hav | e dependents? | No | | | | |
| Do not list Debtor 2. | Debtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depe | endent live |
| | | | Child | 16 years | No. | |
| | | | | | Yes. | |
| | | | Child | 13 years | No. | |
| 0.5 | | | | | ✓ Yes. | |
| | penses include of people other | ✓ No | | | | |
| than | d vous — — | Yes | | | | |
| yourself an dependent | - | | | | | |
| Part 2: Esti | mate Your Ongo | ing Monthly Expenses | | | | |
| | of a date after the l | our bankruptcy filing date unless y bankruptcy is filed. If this is a sup | | - | - | |
| - | - | non-cash government assistance i ded it on Sc <i>hedule I: Your Incom</i> e | = - | | | Your expenses |
| | I or home ownersh or the ground or lot. | ip expenses for your residence. In 4. | clude first mortgage payments and | | 4. | \$1,200.00 |
| | luded in line 4: | | | | •• | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |
| 4b. Prope | rtv. homeowner's. o | r renter's insurance | | | 4h | \$0.00 |

4c.

4d.

\$0.00

\$0.00

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Nina Belt Case number (if known)
First Name Middle Name Last Name

| First Name | Milde Name Last Name | | |
|--|---|------------|------------------|
| | | | Your expenses |
| 5. Additional mortgage paymen | nts for your residence, such as home equity loans | 5. | \$0.00 |
| 6. Utilities: | | | |
| 6a. Electricity, heat, natural ga | 3 | 6a. | \$250.00 |
| 6b. Water, sewer, garbage col | ection | 6b. | \$67.00 |
| 6c. Telephone, cell phone, Int | ernet, satellite, and cable services | 6c. | \$165.00 |
| 6d. Other. Specify: | | 6d | \$0.00 |
| 7. Food and housekeeping sup | plies | 7. | \$450.00 |
| 8. Childcare and children's edu | acation costs | 8. | \$0.00 |
| 9. Clothing, laundry, and dry cl | eaning | 9. | \$150.00 |
| 10. Personal care products and | d services | 10. | \$80.00 |
| 11. Medical and dental expens | es | 11. | \$0.00 |
| 12. Transportation. Include gas Do not include car payments | | 12. | \$200.00 |
| 13. Entertainment, clubs, recre | eation, newspapers, magazines, and books | 13. | \$0.00 |
| 14. Charitable contributions ar | nd religious donations | 14. | \$0.00 |
| 15. Insurance. Do not include insurance dedi | ucted from your pay or included in lines 4 or 20. | | |
| 15a. Life insurance | | 15a | \$72.00 |
| 15b. Health insurance | | 15b | \$0.00 |
| 15c. Vehicle insurance | | 15c | \$46.00 |
| 15d. Other insurance. Specify | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes | deducted from your pay or included in lines 4 or 20. | | |
| Specify: | | 16 | \$0.00 |
| 17. Installment or lease payme | nts: | 10 | |
| 17a. Car payments for Vehicle | | 17a | \$0.00 |
| 17b. Car payments for Vehicle | 2 | 17b | \$0.00 |
| 17c. Other. Specify: | | 17c | \$0.00 |
| | | 17d | \$0.00 |
| | maintenance, and support that you did not report as deducted from | | \$0.00 |
| | e I, Your Income (Official Form 106I). | 18. | |
| , , , | o support others who do not live with you. | | |
| Specify: | a national add in time A and atthictions are an Cabadrala I. Variable and | 19. | \$0.00 |
| 20a. Mortgages on other prop | es not included in lines 4 or 5 of this form or on Schedule I: Your Income. | 202 | \$0.00 |
| 20b. Real estate taxes. | | 20a 20b | \$0.00 \$0.00 |
| 20c. Property, homeowner's, | or renter's insurance | | |
| 20d. Maintenance, repair, and | | 20c 20d | \$0.00 \$0.00 |
| 20e. Homeowner's associatio | | | |
| 200. Homeowifer 3 associatio | 1 of condominant duos | 20e | \$0.00 |

Official Form 106J Schedule J: Your Expenses page 2

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| Debtor 1 | | | Belt | Case number (if known) | | |
|----------|--------------------------|--|-------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21.Other | Specify: | | | | 21 | \$0.00 |
| 00 0-1 | | | | | | |
| | late your monthly exp | Denses. | | | | \$2,680.00 |
| | add lines 4 through 21. | | | | | \$0.00 |
| | Copy line 22 (monthly ex | | \$2,680.00 | | | |
| 22c. A | idd line 22a and 22b. Ti | he result is your monthly exp | enses. | | 22. | |
| 23.Calcu | late your monthly net | income. | | | | |
| 23a. C | Copy line 12 (your comb | pined monthly income) from | Schedule I. | | 23a | \$2,674.40 |
| 23b. 0 | Copy your monthly expe | enses from line 22 above. | | | 23b | \$2,680.00 |
| 23c. S | Subtract your monthly ex | xpenses from your monthly i | ncome. | | | (\$5.60) |
| - | The result is your month | ly net income. | | | 23c | |
| mort | gage payment to increas | to finish paying for your car l se or decrease because of a r | | | | |
| | | | | | | |

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| Fill in this information to identify your case: | | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|--|
| Debtor 1 | Nina | Belt | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | | |
| Case number (If known) | | _ | | | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | | | | | | | | |
|-----|--|--|--|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | | |
| | ☑ No | | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary a that they are true and correct. | and schedules filed with this declaration and | | | | | | | |
| × | /s/ Nina Belt | × | | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | | |
| | Date 8/23/2017 | Date | | | | | | | |
| | MM/DD/YYYY | MM/DD/YYYY | | | | | | | |

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| Fill in t | his infor | mation to id | entify your c | ase: | | | | | | | |
|-------------|----------------|------------------------------|-----------------|-------------------|-------------|--------------------|------------------|------------|---------------------|---|-------------|
| Debtor | r 1 | Nina | | | | Belt | | | | | |
| Debtor | . 2 | First Name | • | Middle | Name | Last Nam | е | | | | |
| (Spouse | | First Name |) | Middle | Name | Last Nam | е | | | | |
| United | States B | ankruptcy C | ourt for the: | Northern | | District of Illino | | | | | |
| | umber | | | | | (Stat | e) | | | | |
| (If knowr | 1) | | | | | | | | | Check if | f this is a |
| <u>Offi</u> | cial | Form | 107 | | | | | | | amende | ed filing |
| Stat | eme | nt of F | inancia | l Affairs | for In | dividuals | Filina fo | r Bankrı | uptcv | | 04/1 |
| inform | ation. I | f more spa | | ed, attach a sep | | | | | | r supplying correct e your name and ca | |
| Part 1 | Give | Details A | bout Your | Marital Status | s and Wh | nere You Lived | Before | | | | |
| 1. | What is: | your curren | t marital sta | ntus? | | | | | | | |
| | ✓ Mar | ried | | | | | | | | | |
| | ☐ Not | married | | | | | | | | | |
| 2. | During t | he last 3 ye | ars, have yo | u lived anywhe | re other t | han where you li | ve now? | | | | |
| | □ No | • | | • | | · | | | | | |
| | | . List all of t | ne places yo | u lived in the la | st 3 years | . Do not include v | where you live i | now. | | | |
| | _ | | | | | | | | | | |
| | Deb | tor 1: | | | | Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 | lived |
| | | | | | there | | | | | there | |
| | | | | | | | Same as | s Debtor 1 | | Same as Deb | otor 1 |
| | | 23 S. Green | | _ | From | 03/2016 | | | | - From | |
| | Nun | nber Street | | | To | 01/2017 | Number Stre | eet | | | _ |
| | Chic | cago | Illinois | 60643 | 10 | 01/2011 | | | | | _ |
| | City | | State | Zip Code | | | City | State | Zip Code | _ | |
| | | | | | | | Same as | s Debtor 1 | | Same as Deb | otor 1 |
| | 124 | 23 S. Carpe | nter Ave. | | F.,, | | | | | - F | |
| | Nun | nber Street | | | From To | | Number Stre | eet | | - From _ To | _ |
| | Dive | erdale | Illinois | 60827 | 10 | | | | | | _ |
| | City | | State | Zip Code | | | City | State | Zip Code | _ | |
| | nd territor No | <i>ries</i> include <i>F</i> | Arizona, Califo | ornia, Idaho, Lou | isiana, Nev | | Puerto Rico, Te | | ate or territory? (| Community property s. n.) | tates |

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Belt

Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$28396.93 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$29758.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$29718.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

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| tor 1 | Nina | | | Be | elt | Case number | (if known) |
|----------------------|---|-------------------------------------|--|---|---|--|--|
| | First Name | | Middle Name | Las | st Name | | |
| Insid corp age | ders include your porations of which | relatives; an you are a for a busir | any general partners an officer, director, ness you operate as | s; relatives of any person in control, | general partners; par or owner of 20% or | tnerships of which y more of their voting | who was an insider? you are a general partner; g securities; and any managing c domestic support obligations, |
| V | No | | | | | | |
| | Yes. List all pay | ments to | an insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| insid Inclu | der? ude payments on No | debts gua | aranteed or cosigne | ed by an insider. | y payments or trans | sfer any property o | n account of a debt that benefited an |
| | Yes. List all pay | ments tha | t benefited an ins | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | | | | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Contract Claim Cook County Circuit Court Pending Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2016-M1-123137 60602 Chicago Illinois City State Zip Code Case title contract claim ✓ Pending Cook County Circuit Court Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2016-M6-004745 Chicago Illinois 60602 City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 05/2017 \$2113 PRESTIGE FINANCIAL SVC Creditor's Name Explain what happened 351 W OPPORTUNITY WAY Number Street Property was repossessed. Property was foreclosed. **DRAPER** Utah 84020 Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Nina | Belt | Case number (if known) | |
|------|---|---------------------------|--|---------------------|
| | First Name Middle Name | Last Name | | _ |
| 11. | Within 90 days before you filed for bankruptcy, did a accounts or refuse to make a payment because you | | bank or financial institution, set off any amo | unts from your |
| | ✓ No Yes. Fill in the details. | | | |
| | Tes. I ill ill the details. | | | |
| | | Describe the action th | ne creditor took Date action was taken | Amount |
| | Creditor's Name | | | |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | | | | |
| | City State Zip Code | | | |
| 12. | Within 1 year before you filed for bankruptcy, was ar appointed receiver, a custodian, or another official? | | possession of an assignee for the benefit of | creditors, a court- |
| | ✓ No | | | |
| | Yes | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| 13. | Within 2 years before you filed for bankruptcy, did y | vou give any gifts with a | total value of more than \$600 per person? | |
| | ▼ No | | | |
| | Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | Number Street | | | |
| | | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| ebtor 1 | Nina | | Belt | Case number (if kno | vn) | |
|----------|---|---|---|---------------------------|--------------------------------------|---------------------|
| | First Name Midd | dle Name | Last Name | | · | |
| | | | | | | |
| . Wit | hin 2 years before you filed for ban | nkruptcy, did y | ou give any gifts or contribution | ons with a total value | of more than \$600 | to any charity? |
| ✓ | No | | | | | |
| ¥ | | ou o o o tuilo ution | _ | | | |
| Ш | Yes. Fill in the details for each gift | or contribution | 11. | | | |
| | Gifts or contributions to charities | s | Describe what you contribu | ited | Date you | Value |
| | that total more than \$600 | | | | contributed | |
| | | | | | | |
| | Charity's Name | | | | | |
| | | | | | | |
| | | | | | | |
| | Number Street | | | | | |
| | | | | | | |
| | City State Z | Zip Code | | | | |
| | • | | | | | |
| t 6: | List Certain Losses | | | | | |
| | | | | | | |
| Wit | hin 1 year before you filed for bank | cruptey or sine | e vou filed for bankruptcy, did | you lose anything be- | cause of theft, fire. | other disaster, or |
| | nbling? | | , | , , | | • |
| | No | | | | | |
| | | | | | | |
| Ш | Yes. Fill in the details. | | | | | |
| | Describe the property you lost an | nd | Describe any insurance cov | verage for the loss | Date of your | Value of property |
| | how the loss occurred | | Include the amount that insur | | loss | lost |
| | | | pending insurance claims on | line 33 of Schedule | | |
| | | | A/B: Property. | | | |
| | | | | | | |
| | | _ | | | | |
| 1 /: | | | | | | |
| Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin | kruptcy, did yo ig a bankruptc | y petition? | | | anyone you consulte |
| Wit | hin 1 year before you filed for bank | kruptcy, did yo ig a bankruptc | y petition? | | | anyone you consulte |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition | kruptcy, did yo ig a bankruptc | y petition? | | | anyone you consulte |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No | kruptcy, did yo ig a bankruptc | ey petition? credit counseling agencies for ser | rvices required in your b | | anyone you consulte |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No | kruptcy, did yo ig a bankruptc | y petition? | rvices required in your b | ankruptcy. | |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No | kruptcy, did yo ig a bankruptc | ey petition? credit counseling agencies for set Description and value of any | rvices required in your b | ankruptcy. Date payment | Amount of |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No | kruptcy, did yo ig a bankruptc | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | ankruptcy. Date payment or transfer | Amount of |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. | kruptcy, did yo ig a bankruptc | ey petition? credit counseling agencies for set Description and value of any | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparinude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | kruptcy, did yo ig a bankruptc | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | kruptcy, did yo ig a bankruptc | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparinude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue | kruptcy, did yo ig a bankruptc | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparinude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street | kruptcy, did yo | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparinude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois | kruptcy, did yo ng a bankrupto n preparers, or | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparinude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois | kruptcy, did yo | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparinude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois | kruptcy, did yo ng a bankrupto n preparers, or | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois & City State Z Email or website address None | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois Good City State Z Email or website address | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois & City State Z Email or website address None | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois & City State Z Email or website address None | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois Good City State Z Email or website address None Person Who Made the Payment, if No | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank out seeking bankruptcy or preparinude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois & City State Z Email or website address None Person Who Made the Payment, if N | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois Good City State Z Email or website address None Person Who Made the Payment, if No | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois Good City State Z Email or website address None Person Who Made the Payment, if No | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6 City State Z Email or website address None Person Who Made the Payment, if N Person Who Was Paid Number Street | cruptcy, did yong a bankrupton preparers, or more parers, or more parers. | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6 City State Z Email or website address None Person Who Made the Payment, if N Person Who Was Paid Number Street | cruptcy, did yong a bankruptch n preparers, or n preparers, or 60643 | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois 6 City State Z Email or website address None Person Who Made the Payment, if N Person Who Was Paid Number Street | cruptcy, did yong a bankrupton preparers, or more parers, or more parers. | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |
| . Wit | hin 1 year before you filed for bank but seeking bankruptcy or preparin ude any attorneys, bankruptcy petition No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois & City State Z Email or website address None Person Who Made the Payment, if N Person Who Was Paid Number Street | cruptcy, did yog a bankruptc n preparers, or 60643 Zip Code | ey petition? credit counseling agencies for set Description and value of any transferred | rvices required in your b | Date payment or transfer was made | Amount of payment |

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| Debto | or 1 | Nina | | Belt | Case r | number <i>(if known)</i> | | | |
|-------|--------------------|---|---|--|--------------|--------------------------------------|------------------------------------|---------|------------------------------|
| | | First Name | Middle Name | Last Name | | | | | |
| | help | hin 1 year before you filed o you deal with your credi not include any payment or | tors or to make paym | | our behalf p | oay or transfer | any property to a | anyone | who promised to |
| | ☑ | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of a transferred | any propert | y | Date payment or transfer was made | Amou | unt of payment |
| | | Person Who Was Paid | | | | | | | |
| | | Number Street | | | | | | | |
| | | City State | Zip Code | | | | | | |
| 18 | Wi+I | | | you sell, trade, or otherwise t | ransfer anv | property to an | wone other than | nroner | ty transferred in |
| | the Incl | ordinary course of your bu | usiness or financial a and transfers made as s | ffairs? security (such as the granting of | | | | | |
| | ✓ | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of transferred | property | Describe any payments re in exchange | / property or ceived or debts p | oaid | Date transfer was made |
| | | Person Who Received Trans | nsfer | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to yo | Zip Code u | | | | | | |
| | | Person Who Received Tran | nsfer | | | | | | |
| | | Number Street | | | | | | | |
| | | City State Person's relationship to yo | Zip Code u | | | | | | |
| | ben | hin 10 years before you file eficiary? ese are often called asset-pro | | d you transfer any property to | a self-settl | ed trust or sim | ilar device of wh | ich you | are a |
| | ✓ | No Yes. Fill in the details. | | | | | | | |
| | | | | Description and value of | the proper | ty transferred | | | Date transfer was made |
| | | Name of trust | | | | | | | |

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code City State Zip Code

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Belt Debtor 1 Nina Case number (if known) Middle Name First Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

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| Debt | tor 1 | | | | Belt | Case nur | mber (if known) | |
|------|----------|----------------------|----------------------------------|-----------------|---|---------------------------|---|--------------------|
| | | First Name | Mi | iddle Name | Last Name | | | |
| 26. | Hav | e you been a party | / in any judicia | l or administr | ative proceeding under | any environmental la | aw? Include settlements and order | rs. |
| | ✓ | No | | | | | | |
| | | Yes. Fill in the det | ails. | | | | | |
| | | | | | Court or agency | Na | ature of the case | Status of the case |
| | | Case title | | | Court Name | | | Pending |
| | | | | | Court Name | | | On appeal |
| | | Case number | | | NumberStreet | _ | | Concluded |
| | | | | | City State | Zip Code | | _ |
| Part | 11: | Give Details Ab | out Your Bu | siness or Co | onnections to Any Bu | siness | | |
| 27. | With | A sole propri | etor or self-em | ployed in a tra | you own a business or ade, profession, or other LC) or limited liability pa | activity, either full-tin | wing connections to any business? | , |
| | | A partner in a | a partnership rector, or mana | aging executiv | e of a corporation quity securities of a corp | | | |
| | ✓ | No. None of the a | bove applies. | Go to Part 12. | | | | |
| | | Yes. Check all that | at apply above | and fill in the | details below for each b | usiness. | | |
| | | | | | Describe the natu | re of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Number Street | | | _ | | Dates business existed | |
| | | Number Street | | | Name of accounta | ant or bookkeeper | Dates business existed | |
| | | City | State | Zip Code | _ | | From To | |
| | | | | | Describe the natu | re of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Number Street | | | _ | | Dates business existed | |
| | | | | | Name of accounta | ant or bookkeeper | | |
| | | City | State | Zip Code | | | FromTo | |
| | | | | | Describe the natu | re of the business | Employer Identification nu include Social Security nu | |
| | | Business Name | | | _ | | EIN: | |
| | | Number Street | | | | | Dates business existed | |
| | | City | State | Zip Code | Name of accounta | ant or bookkeeper | From To | |
| | | | | | | | | _ |

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| Deb | tor 1 N | lina | | | Belt | Case number (if known) |
|-----|--------------|---|-------------------------------|-----------------------|------------------------------|--|
| | F | irst Name | | Middle Name | Last Name | |
| 28. | credi | in 2 years before itors, or other pa No Yes. Fill in the det | rties. | bankruptcy, did yo | u give a financial stateme | ent to anyone about your business? Include all financial institutions, |
| | ш | | | | Date issued | |
| | | | | | Date Issued | |
| | | Name | | | MM/DD/YYYY | |
| | | | | | - | |
| | | Number Street | | | | |
| | | City | State | Zip Code | - | |
| | | • | Otato | Zip codo | | |
| Par | t 12: | Sign Below | | | | |
| 1 | true ar | nd correct. I unde cruptcy case can | erstand that result in fin | making a false stat | ement, concealing prope | ents, and I declare under penalty of perjury that the answers are rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | | Nina Belt ure of Debtor | 1 | | Signature of Debtor 2 |
| | | Oigrida | are or Bobtor | | | Date |
| | | Date 8 | 8/23/2017 | | | Date |
| | Did you | u attach addition | nal pages to | Your Statement of | Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? |
| | No |) | | | | |
| | Ye | | | | | |
| ľ | — Did voi | u nav or agree to | nav someoi | ne who is not an att | orney to help you fill out I | pankruptey forms? |
| | | | pay someon | ic who is not all att | omey to help you ill out i | ountraptoy forms: |
| | ✓ No | | | | | |
| | Ye | es. Name of persor | n | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Fill in this information to identify your case: | | | | | | |
|---|---------------------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Nina | | Belt | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | (State) | | | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: Creditors I information below. | 's Who Have Claims Secured by Property (Official Form 106D), fill in the | | | | |
|---|---|---|--|--|--|
| Identify the creditor and the property that is collateral | What do you intend to do with the property that secures a debt? | Did you claim the property as exempt on Schedule C? | | | |
| Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. | | | |
| Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | |
| Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | No. Yes. | | | |
| Creditor's name: Description of property securing debt: | Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and | No. Yes. | | | |
| | Identify the creditor and the property that is collateral Creditor's name: Description of property securing debt: Creditor's name: Description of property securing debt: | Identify the creditor and the property that is collateral Surrender the property that secures a debt? | | | |

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| Debto | r <u>Nina</u> | | Belt | Case number (if |
|---------|------------------------------|--------------------------|--------------------------|---|
| 1 | First Name | Middle Name | Last Name | known) |
| Part 2: | List Your Unexpired | d Personal Property Leas | es | |
| inform | ation below. Do not list | | l leases are leases that | y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| De | escribe your unexpired p | personal property leases | | Will the lease be assumed? |
| Le | essor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | |
| Le | essor's name: | | | No Yes |
| | escription of leased operty: | | | |
| Le | essor's name: | | | No Yes |
| | escription of leased operty: | | | |
| Le | essor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | |
| Le | essor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | |
| Le | essor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | - |
| Le | essor's name: | | | □ No □ Yes |
| | escription of leased operty: | | | _ |
| Part 3: | Sign Below | | | |
| Und | | | my intention about any | property of my estate that secures a debt and any personal |
| × | /s/ Nina Belt | | × | |
| 5 | Signature of Debtor 1 | | - Się | gnature of Debtor 2 |
| [| Date 8/23/2017 MM/DD/YYYY | | Da | MM/DD/YYYY |

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| | | Northern Distric | ct of Illinois | |
|-------|--|--------------------------------|--|---------------------------------|
| In re | Nina Belt | | Case No. | |
| _ | Debtor | | | (If known) |
| | | | Chapter | Chapter 7 |
| | DISCLOSURE OF | COMPENSATIO | N OF ATTORNEY F | OR DEBTOR |
| 1 | . Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf | year before the filing of the | petition in bankruptcy, or agreed to | be paid to me, for services |
| | For legal services, I have agreed to ac | ocept | | \$1,465.00 |
| | Prior to the filing of this statement I h | have received | | \$0.00 |
| | Balance Due | | | \$1,465.00 |
| 2 | 2. The source of the compensation paid | d to me was: | | |
| | ✓ Debtor | Other (specify) | | |
| 3 | 3. The source of the compensation paid | d to me is: | | |
| | ✓ Debtor | Other (specify) | | |
| 4 | I have not agreed to share the ab members and associates of my la | | n with any other person unless they | <i>t</i> are |
| | | w firm. A copy of the agreeme | th a other person or persons who a ent, together with a list of the name | |
| 5 | 5. In return for the above-disclosed fee, | , I have agreed to render lega | l service for all aspects of the bankı | ruptcy case, including: |
| | a. Analysis of the debtor's finan bankruptcy; | ıcial situation, and rendering | advice to the debtor in determining | y whether to file a petition in |
| | b. Preparation and filing of any | petition, schedules, statemer | nts of affairs and plan which may be | e required; |
| | c. Representation of the debtor | at the meeting of creditors a | nd confirmation hearing, and any a | djourned hearings thereof; |
| 6 | 6. By agreement with the debtor(s), the | above-disclosed fee does no | ot include the following services: | |
| | | | | |
| | | CERTIFIC | ATION | |
| | I certify that the foregoing is a complet stor(s) in this bankruptcy proceedings. | te statement of any agreemer | nt or arrangement for payment to m | e for representation of the |
| | 8/23/2017 | | /s/ Kashwal Kaur | |
| | Date | | Signature of Attorney | |
| | | | Semrad Law Firm | |
| | | | Name of law firm | |
| 1 | | | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

 You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Belt, Nina | Case No | |
|----------------|------------|---|-----------------------------|
| | Debtor(s) | Chapter. | Chapter7 |
| | VERIFIC | ATION OF CREDITOR MATRIX | |
| T knowledge | | that the attached list of creditors is true and c | orrect to the best of their |
| Date: | 8/23/2017 | /s/ Belt, Nina Belt, Nina Signature of Debtor | |

PRESTIGE FINANCIAL SVC 351 W OPPORTUNITY WAY DRAPER, UT, 84020

Michael Torchalski PC 820 E Terra Cotta Ave Ste 207 Crystal Lake, IL, 60014

TORRES CREDIT SRV 27 FAIRVIEW ST STE 301 CARLISLE, PA, 17015

CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR, IL, 61364

CONVERGENT OUTSOURCING 10750 HAMMERLY BLVD #200 Houston, TX, 77043

MBB 1550 N NORTWEST HWY STE 403 PARK RIDGE, IL, 60068

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

AFFILIATED CREDIT SERV 7381 Airport View Dr SW Rochester, MN, 55902

Nicor - PO Box 5407 PO Box 5407 Carol Stream, IL, 60197

US Bank Po Box 790408 Saint Louis, MO, 63179

Kennedy Crossing Apartments 3400 Stevens Ct Hammond, IN, 46323 Pronger Smith Medical Care PO Box 789 Tinley Park, IL, 60477

John, Edwards PO BOX 1501 Highland, IN, 46322

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,465.00

attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$31.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments;

or

2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.



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As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 08/23/2017

ient I (MA V) UT Cli

Attorney RS D

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| Debtor 1 Nina First Name | | Belt | Case number (if known) | |
|---|--|---|---|--|
| | Middle Name restions for Reporting Purpose | Last Name | | |
| 16. What kind of debts do you have? | 16a. Are your debts primaril "incurred by an individua No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril money for a business or No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts y | ly consumer debts? Cal primarily for a perso y business debts? Bu investment or through | nal, family, or househol siness debts are debts n the operation of the b | d purpose." that you incurred to obtain usiness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that No. | er 7. Do you estimate that | t after any exempt proper o distribute to unsecured o | ty is excluded and administrative creditors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49✓ 50-99✓ 100-199✓ 200-999 | 1,000-5,00 5,001-10,0 10,001-25, | 00 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | ✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million | \$10,000,00 \$50,000,00 | -\$10 million [1-\$50 million [1-\$100 million [01-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? | | \$10,000,00 \$50,000,00 | -\$10 million [1-\$50 million [1-\$100 million [01-\$500 million [| \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| Part 7: Sign Below | | | | |
| | of title 11, United States Code. under Chapter 7. If no attorney represents me and | napter 7, I am aware tha I understand the relief d I did not pay or agree | at I may proceed, if eligi available under each cl e to pay someone who i | ble, under Chapter 7, 11,12, or 13 napter, and I choose to proceed s not an attorney to help me fill |
| | out this document, I have obtain I request relief in accordance wi I understand making a false stat connection with a bankruptcy c both. 18 U.S.C. §§ 152, 1341, 1 /s/ Nina Belt Signature of Debtor 1 Executed on 8/23/2017 MM / DD | ned and read the notice that the chapter of title tement, concealing proase can result in fines 1519, and 3571. | e required by 11 U.S.C. I1, United States Code operty, or obtaining mo | § 342(b). , specified in this petition. ney or property by fraud in risonment for up to 20 years, or |

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| Fill in this info | rmation to identify your | case: | | | |
|---------------------------------|--|-------------------------------|--|---|------------------------------------|
| Debtor 1 | Nina | | Belt | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | | | | | |
| <u>.</u> | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the | e: Northern | District of Illinois | | • |
| Case number | | | (State) | | |
| (If known) | | | | | |
| Official | Form 106D | ec | | | Check if this is an amended filing |
| Declarat | tion About an | Individual Debto | r's Schedules | ; | 12/15 |
| If two married | people are filing toget | her, both are equally respons | ble for supplying correc | t information. | |
| Part 1: Sign | | neone who is NOT an attorney | to help you fill out bank | ruptcy forms? | |
| ✓ No | | | | | |
| Yes. | Name of person | | Attach Bankruptcy P Signature (Official Fo | detition Preparer's Notice, Declaration, and normal 119). | |
| | | | e de la companya de l | | |
| | | | | | |
| | | | | | |
| Under per | nalty of perjury, I decla are true and correct. | re that I have read the summa | ary and schedules filed v | vith this declaration and | |
| | A Correct. | \Diamond | | | |
| /s/ Nina i | | | × | | |
| Signature o | of Debtor 1 | | Signature | of Debtor 2 | |
| Date 8/23 | | | Date | | |
| MM | /DD/YYYY | | MM | I/DD/YYYY | |

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| Debtor 1 | | | Belt | Case number (if known) |
|---------------|--|--|----------------------------|---|
| | First Name | Middle Name | Last Name | |
| 28. Wi | thin 2 years before yo editors, or other partic | u filed for bankruptcy, did y es. | ou give a financial state | ment to anyone about your business? Include all financial institutions |
| | No Yes. Fill in the details | s below. | | |
| Statement | | | Date issued | |
| | Name | | MM/DD/YYYY | _ |
| | 110 | | 14110 007 11 11 | |
| | Number Street | | | |
| | City | State Zip Code | | |
| | _ | otate zip code | | |
| Part 12: | Sign Below | | | |
| uue | and correct. I underst | and that making a talse sta ult in fines up to \$250,000, | tement, concealing prop | ments, and I declare under penalty of perjury that the answers are berty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature | | £ \$ | Signature of Debtor 2 |
| | Date 8/23 | /2017 | | Date |
| Did y | ou attach additional p | pages to Your Statement of | Financial Affairs for Indi | riduals Filing for Bankruptcy (Official Form 107)? |
| ************* | lo | | | , |
| | 'es | | | |
| Did ye | ou pay or agree to pay | someone who is not an at | orney to help you fill out | bankruptcy forms? |
| Meletone . | lo | | | |
| D, | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Debtor Nina | | Belt | Case number (if |
|--|--|--|---|
| 1 First Name | Middle Name | Last Name | known) |
| Part 2: List Your Unexpired | Personal Property Leas | es | |
| For any unexpired personal pro information below. Do not list r assume an unexpired personal | cai estate feases. Offexbired | leases are leases that : | Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2). |
| Describe your unexpired pe | ersonal property leases | | Will the lease be assumed? |
| Lessor's name: | | | ☐ No ☐ Yes |
| Description of leased property: | | | |
| Lessor's name: | The state of the s | | ☐ No ☐ Yes |
| Description of leased property: | | | |
| Lessor's name: | | and the second state of the second | □ No □ Yes |
| Description of leased property: | | The second secon | the best of the desired production and the control of the control |
| Lessor's name: | | | ☐ No ☐ Yes |
| Description of leased property: | | | |
| Lessor's name: | | | □ No □ Yes |
| Description of leased property: | | | Land |
| Lessor's name: | mente film for a fair i complete a great mente anno mengafanna auther a fairm a machannagh ghear, separa ar The second s | | □ No □ Yes |
| Description of leased property: | | | tund |
| Lessor's name: | | | ☐ No ☐ Yes |
| Description of leased property: | | | |
| art 3: Sign Below | | | |
| Under penalty of perjury, I dec property that is subject to an i | lare that I have indicated my unexpired lease. | r intention about any pro | operty of my estate that secures a debt and any personal |
| X /s/ Nina Belt Signature of Debtor 1 | bult | ★ Signa | ture of Debtor 2 |
| Date 8/23/2017 MM/DD/YYYY | | Date | MM/DD/YYYY |

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UNITED STATES BANKRUPTCY COURT Northern District of Illinois

| in re: | Belt, Nina Debtor(s) | Case No |
|-----------------|----------------------------------|---|
| | District) | Chapter. Chapter7 |
| | VER | ICATION OF CREDITOR MATRIX |
| Ti knowledge | ne above named Debtors hereby e. | rify that the attached list of creditors is true and correct to the best of their |
| Date: | 8/23/2017 | /s/ Belt, Nina Belt, Nina Signature of Debtor |

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| Debtor 1 Nina | | Belt | Case number @f | known) | |
|--|--|---|--|---|--|
| First Name | Middle Name | Last Name | | | |
| | | | Column A Debtor 1 | Column B Debtor 2 or | |
| 8. Unemployment compensation | | | \$0.00 | non-filing spor | use |
| Do not enter the amount if you cunder the Social Security Act. Ins | ontend that the amount re tead, list it here: | eceived was a benefit | | | |
| For you | | \$0.00 | | | |
| For your spouse | | \$0.00 | | | |
| Pension or retirement income. benefit under the Social Security. | Do not include any amou Act. | nt received that was a | \$0.00 | | |
| 10.Income from all other source amount. Do not include any bene payments received as a victim of international or domestic terrorisn page and put the total below. | efits received under the So a war crime, a crime again | cial Security Act or st humanity, or | | | |
| | | | | | |
| Total amounts from separate pag | oc if one | | +\$0.00 | | |
| Total amounts nom separate pay | es, il dily. | | 1 | T | |
| 11. Calculate your total current i | monthly income. Add line | s 2 through 10 for | \$3.645.76 | + | \$3,645,76 |
| each column. Then add the total for | Column A to the total for | Column B. | | | |
| | | | <u> </u> | | Total current |
| Data umina M/hathau th | - 14 T 4 P | | | | monthly income |
| Part 2: Determine Whether th | | | | | |
| 12. Calculate your current month!12a. Copy your total current mon | | ollow these steps: | Cor | oy line 11 here → | Φ0.045.70 |
| Multiply by 12 (the number | of months in a year) | | , | y ale ranele - y | \$3,645.76 |
| 12b. The result is your annual inc | | m. | | | X 12 12b. \$43.749.12 |
| | · | | | | 12b. <u>\$43,749.12</u> |
| 13 Calculate the median family in | come that applies to you | . Follow these steps: | | | |
| Fill in the state in which you live. | | Illinois | | | |
| Fill in the number of people in you | ır household. | 3 | | | |
| Fill in the median family income for household. | r your state and size of | | | | 13. \$76,406.00 |
| To find a list of applicable median | income amounts, go onlin | ne using the link specified i | n the separate | | |
| instructions for this form. This list 14. How do the lines compare? | may also be available at tr | e bankruptcy cierk's office | | | |
| 14a. Line 12b is less than or Go to Part 3. | equal to line 13. On the to | p of page 1, check box 1, | There is no presumption of | of abuse. | |
| | ne 13. On the top of page | 1, check box 2, The presu | mption of abuse is determ | nined by Form 122A-2 | |
| Part 3: Sign Below | FUIII TZZA-Z. | | | | |
| Cign Dolon | | | | | |
| By signing here, I declare under p | penalty of perjury that the i | nformation on this stateme | ent and in any attachments | is true and correct. | |
| \wedge | A | | | | |
| ✗ /s/ Nina Belt \ \ | KAA | * | | | |
| Signature of Debtor 1 | <u> </u> | <u> </u> | nature of Debtor 2 | | |
| Deta 0/00/0047 | | | | | |
| Date 8/23/2017 MM/DD/YYYY | | Dat | e 8/23/2017 MM/DD/YYYY | | |
| | | | 711170071111 | | |
| If you checked line 14a, do NO If you checked line 14b, fill out | | | | | |
| The state of the s | and the second s | | the common property and the common property of the common property o | to the control of the state of | experience of the community of the commu |